## Case 16-14044 Doc 1 Filed 04/25/16 Entered 04/25/16 15:47:52 Desc Main Document Page 1 of 55

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13
	The second secon

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
-	Write the name that is on your government-issued picture identification (for example,	Sheila First name	First name
	your driver's license or passport).	Renee Middle name	Middle name
	Bring your picture	Jackson	whole harme
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8		Annual por contraction of the co
	years	First name	First name
	Include your married or maiden names.	Middle name	Middle name RILE
		Last name	Last name UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
		First name	First name APR 25 2016
		Middle name	Middle name JEFFREY P. ALLSTEADT, CLERK
		Last name	Last name
Striftlight.			
		xxx - xx - <u>1 2 6 5</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx
11.12.55.60			

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Debtor		Jackson	Case number (if known)
	First Name Middle f	lame Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
an Ide (El	ny business names d Employer entification Numbers IN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	e last 8 years	Business name	Business name
	ing business as names	Business name	Business name
		EIN	<u>EIN</u>
		EIN	EIN
5. Wh	nere you live		If Debtor 2 lives at a different address:
		316 Oglesby Ave	(
		Number Street	Number Street
		Calumet City IL 60409	
		City State ZIP Code	City State ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	if Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		n/a	:
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
	y you are choosing	Check one:	Check one:
	kruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition,</li> <li>I have lived in this district longer than in any other district.</li> </ul>
		I have another reason, Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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De	btor 1	Sheila First Name	R. Middle Name	Jac	kson Last Nan	me		Case number (#	(known)
Wes	Authorize procé								
Pá	art 2:	Tell the Cou	rt About	Your	Bankru	ıptcy Case			
Bank		apter of the uptcy Code y	υu	Check of for Ban	one. (Fo kruptcy (	or a brief description of each, (Form 2010)). Also, go to the	, see <i>Not</i> e top of p	ice Required by 1 page 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
	are che	choosing to file ler		☑ Cha				_	
				Cha	pter 11	1			
				☐ Cha	pter 12	2			
e Charleston and	ÇEY MININE I ALAN MINIY ANALONYAN YA	Green of the second of the sec		☐ Cha	pter 13	3			
8.	How yo	ou will pay th	(	Inca your subtr with I nea App I rea By Ia less pay	rself, your mitting you a pre-ped to ped to	for more details about he course may pay with cash, cayour payment on your be printed address.  The pay the fee in installment for Individuals to Pay The hat my fee be waived (Yadge may, but is not requison for the official povertime.	ow you restrict your shalf, you may four may lined to, you line the shalf hoose the same of the same o	may pay. Typical check, or money ur attorney may bu choose this op Fee in Installment request this opi waive your fee, at applies to you his option, you mis option.	neck with the clerk's office in your lly, if you are paying the fee or order. If your attorney is pay with a credit card or check option, sign and attach the ents (Official Form 103A).  Ition only if you are filing for Chapter 7. and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.
bankru		you filed for ruptcy within the years?	ie –	Z No	Dietriot				
•	iasto y	cais!	•	<b>-</b> 103.	District			MM / DD / YYYY	Case number
					District		When	MM / DD / YYYY	Case number
					District		When		Case number
***********		representation del habendo memorio (1777) del deschie mo			17-7-7-14-1 table back and bac			MM / DD / YYYY	
		any bankruptcy les pending or being d by a spouse who is filing this case with l, or by a business tiner, or by an	ina	ð No					
f	iled by		o is	Yes.	Debtor				Relationship to you
þ	ou, or				District		When	MM / DD / YYYY	Case number, if known
					Debtor				Relationship to you
									Case number, if known
	o you i	ent your e?		l Yes.	Go to lir Has you residend	ur landlord obtained an evict	tion judgr	ment against you a	and do you want to stay in your
					Yes.	Go to line 12.  Fill out Initial Statement Atbankruptcy petition.		viction Judgment .	Against You (Form 101A) and file it with

Sheila

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Debt	or 1 Sheila			ckson			Case number (if known)
	rasi ivanie	Middle Nai	me	Last Name			
Do	Donaud &				_		
Fair	t 3: Report A	bout Any I	Busines	ses You	Own as a S	ole Proprietor	
12.	Are you a sole p	proprietor	☑ No.	. Go to Part	4.		
	of any full- or pa	art-time		s Name an	d location of b	Vicinos	
A	A sole proprietorsh	ip is a	_ ,	ii i tairie an	d location of t	Jusiness	
b	ousiness you opera	ite as an		Name of b	usiness, if any		
s	eparate legal entit	y such as			•		
	corporation, partn LC.	ersnip, or		Number	Street		
11	f you have more th ole proprietorship,	an one					
S	eparate sheet and	attach it					
K	o this petition.			City			State ZIP Code
				<u>.</u>			
						box to describe yo	
							11 U.S.C. § 101(27A))
							in 11 U.S.C. § 101(51B))
						ined in 11 U.S.C. (as defined in 11 t	
					of the above	(as delined in 11 t	U.S.C. § 101(6))
				- None	or the above	7/2/4M - AA	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?		most re any of the	appropriate cent baland hese docun	e deadlines. If the sheet, state nents do not e	you indicate that ement of operation exist, follow the pro	know whether you are a small business debtor so that it you are a small business debtor, you must attach your ns, cash-flow statement, and federal income tax return or if ocedure in 11 U.S.C. § 1116(1)(B).	
	or a definition of sn	nall	No.	I am not fil	ling under Ch	apter 11.	
	usiness debtor, see 1 U.S.C. § 101(51E		☐ No.	l am filing the Bankrı	under Chapte iptcy Code.	r 11, but I am NO	T a small business debtor according to the definition in
			☐ Yes.	I am filing Bankrupto	under Chapte y Code.	r 11 and I am a sr	mall business debtor according to the definition in the
Part	4s Report if Y	ou Own o	r Have	Any Haza	rdous Prop	erty or Any Pro	operty That Needs Immediate Attention
14. <b>D</b> a	o you own or ha	we any	☑ No				
pr	operty that pos	es or is		18/1			
	leged to pose a imminent and	threat	■ Yes.	What is th	ne hazard?		
	entifiable hazar						
	ıblic health or s r do you own ar						
	operty that nee			If immedia	ate attention i	s needed, why is i	it needed?
	r example, do you					•	
tha	rishable goods, or at must be fed, or a at needs urgent rep	building					
	goin rop			Where is	the property?		
				<del>-</del>	, - <del>, , ,</del> ,	Number St	treet
						City	State ZIP Code

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Debtor 1

Sheila R. Jackson
First Name Middle Name Last Nar

Case number (if known)\_\_\_\_\_

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Del	otor	7
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You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_	I am not required to receive a briefing a	bout
	credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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U	ebtor 1 Sitelia R.  First Name Middle Name	Jackson me Last Name	Cas	e number (if known)	
P	art 6: Answer These Que	stions for Reporting Purpose	es		
16	. What kind of debts do you have?	16a. Are your debts primari as "incurred by an individua No. Go to line 16b.  Yes. Go to line 17.	ily consumer debts? Co al primarily for a personal, fa	nsumer debts are mily, or household	defined in 11 U.S.C. § 101(8) I purpose."
		16b. <b>Are your debts primari</b> money for a business or inv	ily business debts? Bus	iness debts are de ration of the busin	ebts that you incurred to obtain ess or investment.
		<ul><li>☑ No. Go to line 16c.</li><li>☑ Yes. Go to line 17.</li></ul>			
		16c. State the type of debts you	owe that are not consumer	debts or business	debts.
17.	. Are you filing under Chapter 7?	☐ No. I am not filing under Cha	apter 7. Go to line 18.		none apunto e de contra de contra de contra que per en el contra de contra d
bilance some	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		r 7. Do you estimate that aft s are paid that funds will be a	er any exempt pro available to distribi	operty is excluded and ute to unsecured creditors?
18.	How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 milli \$10,000,001-\$50 mi \$50,000,001-\$100 m \$100,000,001-\$500	llion [ nillion [	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much do you estimate your liabilities to be?	■ \$0-\$50,000 ■ \$50,001-\$100,000 ■ \$100,001-\$500,000 ■ \$500,001-\$1 million	\$1,000,001-\$10 milli \$10,000,001-\$50 mil \$50,000,001-\$100 m \$100,000,001-\$500	llion [ hillion [	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	rt 7: Sign Below				
Fo	r you	I have examined this petition, and correct.  If I have chosen to file under Chap of title 11, United States Code. I u	oter 7, I am aware that I ma	v proceed. if eliaibl	le, under Chapter 7, 11,12, or 13
		under Chapter 7.  If no attorney represents me and I this document, I have obtained an	I did not pay or agree to pay	someone who is a	not an attorney to help me fill out
		I request relief in accordance with			
		I understand making a false stater with a bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1519, and	in fines up to \$250,000, or i	or obtaining money mprisonment for u	or property by fraud in connection p to 20 years, or both.
		Signature of Debtor 1	eeso- s	Signature of Det	otor 2
		Executed on 04/23/20	0/6	Executed on	M / DD /YYYY

Sheila

Debtor 1

R.

Jackson

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Debtor 1	Sheila First Name	R. Middle Name	Jackson Last Name	Case number (# known)
oankrup attorney	if you are filing the control of the	n	should understar themselves succ consequences, y	u, as an individual, to represent yourself in bankruptcy court, but you and that many people find it extremely difficult to represent essfully. Because bankruptcy has long-term financial and legal ou are strongly urged to hire a qualified attorney.
in attorn	ey, you do n ile this page	ot	technical, and a mis dismissed because hearing, or coopera firm if your case is s	ou must correctly file and handle your bankruptcy case. The rules are very stake or inaction may affect your rights. For example, your case may be you did not file a required document, pay a fee on time, attend a meeting or the with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit selected for audit. If that happens, you could lose your right to file another see protections, including the benefit of the automatic stay.
			court. Even if you p in your schedules. I property or property also deny you a dis- case, such as destr cases are randomly	In property and debts in the schedules that you are required to file with the lan to pay a particular debt outside of your bankruptcy, you must list that debt if you do not list a debt, the debt may not be discharged. If you do not list claim it as exempt, you may not be able to keep the property. The judge can charge of all your debts if you do something dishonest in your bankruptcy oying or hiding property, falsifying records, or lying. Individual bankruptcy audited to determine if debtors have been accurate, truthful, and complete.
			hired an attorney. T successful, you mus Bankruptcy Procedu	without an attorney, the court expects you to follow the rules as if you had he court will not treat you differently because you are filing for yourself. To be st be familiar with the United States Bankruptcy Code, the Federal Rules of the court in which your case is filed. You must also state exemption laws that apply.
			Are you aware that to consequences?	filing for bankruptcy is a serious action with long-term financial and legal
			No No	
			☑ Yes	
			inaccurate or incomp	pankruptcy fraud is a serious crime and that if your bankruptcy forms are plete, you could be fined or imprisoned?
ē			☐ No ☑ Yes	
				e to pay someone who is not an attorney to help you fill out your bankruptcy forms?
			Yes, Name of Per	sonVeronica Eason
			have read and under	knowledge that I understand the risks involved in filing without an attorney. I rstood this notice, and I am aware that filing a bankruptcy case without an me to lose my rights or property if I do not properly handle the case.
		,	Signature of Debtor 1	Signature of Debtor 2
			Date OU/ 3 MM / DD	3/2016 Date MM / DD / YYYY
			Contact phone	Contact phone
			Cell phone (708)	928-9896 Cell phone
			Email address sheilai	ackson913@yahoo.com Fmail address

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Fill in this i	nformation to ic	lentify your case:		
Debtor 1	Sheila	R	Jackson	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	) First Name	Middle Name	Last Name	
United States	Bankruptcy Court	for the: Northern Distri	ct of Illinois	Z
Case number	(If known)	***************************************	, , , , , , , , , , , , , , , , , , ,	

Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your as: Value of	sets what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,402.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	4,402.00
art 2: Summarize Your Liabilities		
	Your lia	bilities you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	21,568.00
Your total liabilities	\$	21,568.00
rt 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,349.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,485.00

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Debtor 1

Sheila

Document Jackson

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First Name

Case number (if known)\_

P	Part 4: Answer These Questions for Administrative and Statistical Records					
6.	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?					
enç'A kalancı	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes					
7.	7. What kind of debt do you have?	de de la companya de				
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primaril family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 1	y for a personal, 59.				
ald Antilons	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Chec this form to the court with your other schedules.	k this box and submit				
8.	<ol> <li>From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.</li> </ol>	s 2,515.00				
		\$ 2,013.00				
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:  Total claim  From Part 4 on Schedule E/F, copy the following:					
	9a. Domestic support obligations (Copy line 6a.)	0.00				
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	0.00				
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	0.00				
	9d. Student loans. (Copy line 6f.) \$11	,361.00				
:	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	0.00				
!	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$	0.00				
Ş	9g. <b>Total.</b> Add lines 9a through 9f.	,361.00				

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Fill in this information to identify your case and this filing:

Debtor 1 Sheila R Jackson
First Name Middle Name Last Name

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

#### Official Form 106A/B

Part 1:

## Schedule A/B: Property

United States Bankruptcy Court for the: Northern District of Illinois

12/15

Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? ☐ Manufactured or mobile home Land Investment property Describe the nature of your ownership ☐ Timeshare City ZIP Code State interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: \_ If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Current value of the Condominium or cooperative Current value of the portion you own? entire property? Manufactured or mobile home 0.000.00 ☐ Land Investment property Describe the nature of your ownership Timeshare interest (such as fee simple, tenancy by ZIP Code City State the entireties, or a life estate), if known. Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local

property identification number: \_\_\_

Debtor 1

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First Name Middle Name Last Name Document Page 11 of 55 number (if known)

1.3.		lo punthou de	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Street address, if available	e, or other description	Condominium or cooperative     Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	<del></del>		Land	\$0.00	\$0.0
	City	State ZIP Code	Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property? Check one.	with the first t	
		***************************************	Debtor 1 only		
	County		Debtor 2 only		
			Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	ommunity property
			At least one of the debtors and another	(see manuchons)	
			Other information you wish to add about this ite property identification number:	em, such as local	
Add t	he dollar value of the	portion you own for a	II of your entries from Part 1, including any entries	s for pages	\$ 0.0
			here		<b>1 9</b>
you c	•	al or equitable intere	st in any vehicles, whether they are registered or i	•	s
you do own: Cars,	own, lease, or have leg that someone else drive vans, trucks, tractors	al or equitable interess. If you lease a vehicl	e, also report it on Schedule G: Executory Contracts a	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
you cown: Cars, Ye	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage:	al or equitable interests. If you lease a vehicles sport utility vehicles  Pontiac  Grand Prix  2006	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	alms or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own?
you communication own to own the own to own the own th	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage:	Pontiac Grand Prix 2006 125,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own?
you communication own in the communication of the c	own, lease, or have leg that someone else drive vans, trucks, tractors of the session of the ses	Pontiac Grand Prix 2006 125,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$3,202.00  Do not deduct secured cla	alms or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$3,202.00
you common own of own own of own of own of own own of own of own own of own	own, lease, or have leg that someone else drive vans, trucks, tractors of es.  Make: Model: Year: Approximate mileage: Other information:  own or have more than Make:	Pontiac Grand Prix 2006 125,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clain  Current value of the entire property?  \$3,202.00  Do not deduct secured clathe amount of any secure claim	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ 3,202.00
you con some some some some some some some some	own, lease, or have leg that someone else drive vans, trucks, tractors of the second s	Pontiac Grand Prix 2006 125,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$ 3,202.00  Do not deduct secured clathe amount of any secure Creditors Who Have Claim	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ 3,202.00  alims or exemptions. Put d claims on Schedule D: ns Secured by Property.
you con town to own to	own, lease, or have leg that someone else drive vans, trucks, tractors of else Make:  Make:  Model:  Year:  Approximate mileage: Other information:  own or have more than Make: Model: Year:	Pontiac Grand Prix 2006 125,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Clain  Current value of the entire property?  \$3,202.00  Do not deduct secured clathe amount of any secure claim	alms or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ 3,202.00  alms or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the
Cars,  Cars,  No  X Y  3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors of the second s	Pontiac Grand Prix 2006 125,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$ 3,202.00  Do not deduct secured clathe amount of any secure Creditors Who Have Claim  Current value of the	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ 3,202.00

Debtor 1

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3.3.	Make:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	the amour	duct secured cl nt of any secure Who Have Clair	d claims o	n Schedule D.
	Year:	·	Current	value of the	Curren	t value of th
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire pr			you own?
	Other information:	At least one of the deplots and another				
	Other mornation.	☐ Check if this is community property (see	\$	0.00	\$	0.00
		instructions)				
3.4.	Make:	Who has an interest in the property? Check one.	Do not dec	duct secured cla	alms or eye	emotions Put
3.4.		Debtor 1 only	the amour	nt of any secure	d claims or	Schedule D:
	Model:	Debtor 2 only	Creditors	Who Have Clair	ms Secured	by Property.
	Year:	Debtor 1 and Debtor 2 only		value of the		t value of the
	Approximate mileage:	At least one of the debtors and another	entire pr	operty?	portion	you own?
	Other information:			0.00		0.00
		☐ Check if this is community property (see	\$	0.00	\$	0.00
		instructions)				
	nical Posts trailors motors sersonal		-1			
) No		watercraft, fishing vessels, snowmobiles, motorcycle accessor  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not dec the amoun Creditors V	duct secured cla t of any secured Who Have Clain ralue of the operty?	d claims on ns Secured Current	Schedule D: by Property. value of the you own?
Yeu	Make:  Model:  Year: Other information:  own or have more than one, list here:  Make:  Model:  Year:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not dec the amount Creditors V	t of any securer Who Have Clain value of the operty?  0.00  uct secured cla t of any securec Who Have Clain value of the	Current portion  \$	Schedule D: by Property.  value of the you own?  0.00  mptions. Put. Schedule D:
Ye Ye you 1.2.	Make:  Model:  Year: Other information:  own or have more than one, list here:  Make: Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not decitive productions in the amount of	t of any securer Who Have Clain value of the operty?  0.00  uct secured cla t of any securec Who Have Clain value of the	Current portion  \$	Schedule D: by Property.  value of the you own?  0.00  mptions. Put Schedule D: by Property.  value of the
No.1.	Make:  Model:  Year: Other information:  own or have more than one, list here:  Make:  Model:  Year:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not decitive productions in the amount of	t of any securer Who Have Clain value of the operty?  0.00  uct secured cla t of any securec Who Have Clain value of the	Current portion  \$	value of the your own?  O.00  nptions. Put Schedule D. by Property.  value of the

### Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	<b>portion y</b> Do not ded	uct secured claims
6. Household goods and furnishings	or exemption	<b>(15.</b> )
Examples: Major appliances, furniture, linens, china, kitchenware		
574		
Yes. Describe	and the second s	0.00
	\$	0.00
7. Electronics	a too septy-thous-to-Moor's Acros Section (1999)	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu	•	
collections; electronic devices including cell phones, cameras, media players, games	ISIC	
☐ No		
Yes. Describe		200.00
100000000000000000000000000000000000000	\$	200.00
8. Collectibles of value	THE RESIDENCE OF THE PROPERTY	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;		
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
☑ No		
Yes. Describe	r	0.00
	\$	
9. Equipment for sports and hobbies		:
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cand	nes	
and kayaks; carpentry tools; musical instruments	000	
<b>2</b> No		
☐ Yes. Describe		0.00
	\$	0.00
10. Firearms		
Examples: Pistols, rifles, shotguns, ammunition, and related equipment		:
2 No		:
☐ Yes. Describe	\$	0.00
	<u> </u>	
11. Clothes		
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
□ No		
☑ Yes. Describe Clothes	\$	1,000.00
	Ψ	
12. Jewelry		1
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver	) <sub>t</sub>	d antifringenty von
<b>☑</b> No	to - constitution to the second to the secon	
Yes. Describe	\$	0.00
13. Non-farm animals	1	
Examples: Dogs, cats, birds, horses		
☑ No		
Yes. Describe	\$	0.00
14. Any other personal and household items you did not already list, including any health aids you did not list	Amerikanska av skriveter konstanter senska å	Conservation provide Ac-
No.		
Yes. Give specific	T AND COME OF A PURSON OF CONTROL TO A TOTAL OF CONTROL TO A CONTROL T	2 22
	\$	0.00
Information		
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	<b>_   s</b>	1,200.00
for Part 3. Write that number here	<b></b>	ì

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Part 4: **Describe Your Financial Assets** 

Do you own or have an	y legal or equitable interest in	any of the following?		Current va portion you Do not deduc or exemption	u own? ct secured claims
16. Cash  Evamples: Money you	have in your wallet in your bo	ne, in a safe deposit box, and on hand when you fil	e vour petition		
	Thave in your watter, in your not	ine, in a said doposit box, and on hand when you in	e your pennon		
☑ No ☐ Yes			Cash: ,	\$	0.00
			Jasii	·· •	
		unts; certificates of deposit; shares in credit unions, nultiple accounts with the same institution, list each.		5,	
<b>☑</b> No					
☐ Yes		Institution name:			
	17.1. Checking account:			. \$	0.00
	17.2. Checking account:			. \$	0.00
	17.3. Savings account:			. \$	0.00
	17.4. Savings account:			. \$	0.00
	17.5. Certificates of deposit:			. \$	0.00
	17.6. Other financial account:			. \$	0.00
	17.7. Other financial account:			. <b>S</b>	0.00
	17.8. Other financial account:			\$	0.00
	17.9. Other financial account:			¢	0.00
				Ψ	VIA-TICONOMIA DO TIAN TO THE TO THE TOTAL TOTAL TO THE TO
	, or publicly traded stocks , investment accounts with brok Institution or issuer name:	erage firms, money market accounts			
				_ \$	0.00
				_ \$	0.00
				- \$	0.00
an LLC, partnership,  ☑ No ☑ Yes. Give specific			an interest in  of ownership:	\$	0.00
an LLC, partnership,	and joint venture  Name of entity:	9,	6 of ownership:	\$ \$	0.00

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Non-negotiable instrum			
<ul><li>✓ No</li><li>✓ Yes. Give specific</li></ul>	Issuer name:		
information about	issuel fiame.	\$	0.00
them		***************************************	0.00
			0.00
1. Retirement or pension			
Z No	RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or p	pront-snaming plans	
Yes. List each			
account separately.	Type of account: Institution name:		
	401(k) or similar plan:	<u> </u>	0.00
	Pension plan:		0.00
	IRA:	\$	0.00
	Retirement account:		0.00
			0.00
		A	0.00
	Additional account:	Ψ	
	Additional account:	\$	0.00
		***************************************	0.00
Your share of all unused		any	0.00
Your share of all unused Examples: Agreements	prepayments I deposits you have made so that you may continue service or use from a comp	any	0.00
Your share of all unused Examples: Agreements companies, or others	prepayments I deposits you have made so that you may continue service or use from a comp	any	
Your share of all unused Examples: Agreements companies, or others  No	prepayments I deposits you have made so that you may continue service or use from a comp with landlords, prepaid rent, public utilities (electric, gas, water), telecommunica	any	0.00
Your share of all unused Examples: Agreements companies, or others  No	prepayments I deposits you have made so that you may continue service or use from a composite you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicate and the service of the s	any	0.00
Your share of all unused Examples: Agreements companies, or others  No	prepayments I deposits you have made so that you may continue service or use from a composits you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicate and the service of the s	any tions \$	0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No	prepayments I deposits you have made so that you may continue service or use from a composite you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicate institution name or individual:  Electric:  Gas:	any tions 	0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No	prepayments I deposits you have made so that you may continue service or use from a composits you have made rent, public utilities (electric, gas, water), telecommunicated institution name or individual:  Electric:  Gas:  Heating oil:	any tions 	0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No	prepayments I deposits you have made so that you may continue service or use from a composite you have made rent, public utilities (electric, gas, water), telecommunicate with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicate landlords.  Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:	any tions 	0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No	I deposits you have made so that you may continue service or use from a composits you have made rent, public utilities (electric, gas, water), telecommunication name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:	any tions 	0.00 0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No	prepayments I deposits you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicate institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:	any tions 	0.00 0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No	I deposits you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicate institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:	any tions 	0.00 0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No Yes	prepayments I deposits you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunication institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:	any tions 	0.00 0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No Yes	prepayments I deposits you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunication in the service or use from a composite properties of the service of the servic	any tions 	0.00 0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No Yes	I deposits you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicated institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:  a periodic payment of money to you, either for life or for a number of years)	any tions 	0.00 0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others  No Yes	Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:  a periodic payment of money to you, either for life or for a number of years)  Issuer name and description:	any tions	0.00 0.00 0.00 0.00 0.00 0.00
Examples: Agreements companies, or others  No Yes	I deposits you have made so that you may continue service or use from a composite with landlords, prepaid rent, public utilities (electric, gas, water), telecommunicated institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:  a periodic payment of money to you, either for life or for a number of years)	any tions	0.00 0.00 0.00 0.00 0.00 0.00 0.00

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		ified ABLE program, or u	under a qualified state tuition program.	and the section of the	11.5 x 6.28 % 6 x 1000 x 10 x 10 x 100 x
26 U.S.C. §§ 530(b)(1), 529A(b), a	nd 529(b)(1).				
☑ No ☐ Yes					
ins	titution name and des	cription. Separately file the	records of any interests.11 U.S.C. § 521(	C):	
				\$	0.00
0.0	00			\$	0.00
NORMAN AND AND AND AND AND AND AND AND AND A	· · · · · · · · · · · · · · · · · · ·			\$	0.00
25. Trusts, equitable or future intere	sts in property (othe	r than anything listed in	line 1), and rights or powers		
exercisable for your benefit					
☑ No ☐ Yes. Give specific					
information about them				\$	0.00
L					
26. Patents, copyrights, trademarks					
Examples: Internet domain names,	websites, proceeds in	rom royames and licensing	agreements		
No No					
Yes. Give specific information about them				\$	0.00
		gay ayan yankankala a a famba Adamah dari a atri dali ka ki ti atri da 100 ki ti atr		!	
27. Licenses, franchises, and other					
Examples: Building permits, exclus	ive licenses, cooperat	ive association holdings, li	quor licenses, professional licenses		
☑ No				······································	
Yes. Give specific				•	0.00
information about them				\$	0.00
				Curran	value of the
Money or property owed to you?				portion	you own?
					educt secured exemptions.
	etigi qara qay xarasi qarqaylari qara qara xara qara qa	Mark Mark of a turk of providing and read and included in the			5 T T T T T T T T T T T T T T T T T T T
8. Tax refunds owed to you					
No Transfer of					0.00
Yes. Give specific information about them, including whe	ther		Federal:	\$	0.00
you already filed the return	าร		State:	\$	
and the tax years	• • • • • • • • • • • • • • • • • • •		Local:	\$	0.00
	f.g.q.,	And the second in the second s			
9. Family support					
Examples: Past due or lump sum a	limony, spousal suppo	ort, child support, maintena	ince, divorce settlement, property settleme	ent	
☑ No					
Yes. Give specific information			Alimony:	\$	0.00
			Maintenance:	\$	0.00
	**************************************		Support:	\$	0.00
	Assistance		Divorce settlement:	\$	0.00
	AMILIARATINGGAL		Property settlement:	\$	0.00
			1		
Other amounts someone owes y     Evennles: Innaid wages, disability	ou / insurance navmente	disability benefits, sick na	y, vacation pay, workers' compensation,		
Social Security benefits	; unpaid loans you ma	de to someone else	3)		
☑ No					
Yes. Give specific information					0.0

Debtor 1

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	و من الأناب المنافذة	median mengangan kebangan di kepada kebangan di Kabangan di Kabangan di Kabangan di Kabangan di Kabangan di Kab	and the second s	and a second control of the second control of the second	raproduces and the following resources are also thank at the state of the
31	. Interests in insurance policies				
		ce; health savings account (HS	A); credit, homeowner's, or renter's insurance		
	☑ No				
	☐ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender	or refund value:
	of each policy and list its value	, ,	•	\$	0.00
				\$	0.00
				\$	0.00
				Ψ	
32	property because someone has died.		rance policy, or are currently entitled to receive		
	No State of the st				
	Yes. Give specific information			\$	0.00
				and the second	
33	<ul> <li>Claims against third parties, whether or Examples: Accidents, employment dispute</li> <li>No</li> </ul>				
	Yes Describe each claim				
	Tes. Describe each claim			\$	0.00
34	Other contingent and unliquidated claim to set off claims	s of every nature, including o	counterclaims of the debtor and rights		:
	No				
	Yes. Describe each claim			\$	0.00
35.	Any financial assets you did not already	list			
	No No				0.00
	Yes. Give specific information	MATABLE MET TATOMET TO THE		\$	0.00
36.	Add the dollar value of all of your entrie				0.00
	for Part 4. Write that number here			Ψ	
* (w*\*\*\*\		man and a second control of the second contr	and the second s		
Pā	rt 5: Describe Any Business-I	Related Property You C	Own or Have an Interest In. List any I	eal estat	e in Part 1.
37	Do you own or have any legal or equitab	le interest in any business-re	elated property?		
0,	No. Go to Part 6.	•••••••••••••••••••••••••••••••••••••••	, , ,		and desired a special of the special
	Yes. Go to line 38.				
				Current va portion you Do not deduct or exemption	u own? ct secured claims
		1		e sy remoteration of the	esta esta la li
38.	Accounts receivable or commissions yo	u aiready earned			
	No No			7	
	Yes, Describe			\$	0.00
^~	Office and most fundahing and area	lie		and.	
39.	Office equipment, furnishings, and supp Examples: Business-related computers, software	, modems, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, electronic devices	š	:
	☑ No	•		atoria,	
	Yes. Describe	our manners ProPrint Advingspipes externations of the day of special propriations and the second of the second	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	\$	0.00
			and the second s		and the state of t

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40. Machinery, fixtures, e	quipment, supplies you use in business, and tools of your trade	M
<b>☑</b> No		
Yes, Describe		\$0.00
L		<b></b>
41. Inventory		:
No Yes. Describe		\$ 0.00
Tes. Describe		, J
42.Interests in partnersh	ins or joint vantures	1
₩ No	po or joint variation	
Yes. Describe	Name of entity: % of ownership:	
	%	\$0.00
	<u></u>	\$ 0.00
	%	\$0.00
43 Customer liete mailin	g lists, or other compilations	
<b>№</b> No		: ;
=	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	;
□ No		
Yes. Desc		\$
44. Any business-related	property you did not already list	}
Yes. Give specific		\$ 0.00
information		\$ 0.00
		\$ 0.00
:		¢ 0.00
		\$ 0.00
		\$
		\$
45. Add the dollar value of	of all of your entries from Part 5, including any entries for pages you have attached	\$0.00
for Part 5. Write that I	number here	
والمراوية والمراوية والمعتون وسيست المستوارية والمراود والمراود والمراود والمداود والمراوية والمستوسية المراوية		
Part 6: Describe A	ny Farm- and Commercial Fishing-Related Property You Own or Have an Interest I	n.
If you own or	have an interest in farmland, list it in Part 1.	
46. Do you own or have a No. Go to Part 7.	ny legal or equitable interest in any farm- or commercial fishing-related property?	
Yes. Go to line 47.		
		Current value of the
		portion you own?  Do not deduct secured claims
		or exemptions.
47. Farm animals	oultry, farm-raised fish	
Examples: Livestock, p  ✓ No	ouisy, tamirtaised tisti	) :
Yes		
		\$ 0.00
Ĺ		

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Jackson Page 19 of 55 mumber (#known)

Page 19 of 55 mumber (#known) Desc Main Debtor 1 48. Crops-either growing or harvested No ☐ Yes. Give specific 0.00 information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **1** No ☐ Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed No No ☐ Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No No Yes. Give specific 0.00 information.... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here ..... Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **2** No 0.00 ☐ Yes. Give specific 0.00 information..... 0.00 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... List the Totals of Each Part of this Form Part 8: 0.00 55. Part 1: Total real estate, line 2 3,202.00 56. Part 2: Total vehicles, line 5 1,200.00 57. Part 3: Total personal and household items, line 15 0.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 4,402.00 Copy personal property total → 62. Total personal property. Add lines 56 through 61. ..... 4,402.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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Fill in this in	oformation to ide Sheila	entify your case:	Jackson	
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	or the:Northern District of Ifli	inois	
Case number (If known)				
******		·		

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B	on of the property and line on that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Line from Schedule A/B:	2006 Pontiac Grand F 3.1	\$ <u>3,202.00</u>	\$\frac{3,202.00}{100\% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Brief description: Line from Schedule A/B:	Electronics 7	\$200.00	<ul> <li>■ \$ 200.00</li> <li>■ 100% of fair market value, up to any applicable statutory limit</li> </ul>	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Clothings 11	\$1,000.00	<ul> <li>         ■ \$ 1,000.00     </li> <li>         □ 100% of fair market value, up to any applicable statutory limit     </li> </ul>	735 ILcs 5/12-1001(a)

3.	Are v	ou claiming	a homestead	exemption o	f more than	\$160,3752

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

**Ø** No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☑ No

Yes

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Debtor 1	Sheila	R	Jackson	
200107	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	) First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District of	Illinois	7

☐ Check if this is an amended filing

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

for each claim. If more than one creditor	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. shabetical order according to the creditor's name.	Column A Amount of a Do not deduct value of colla	t the	Column B Value of a that supp claim		Column C Unsecured portion If any
2.1 n/a	Describe the property that secures the claim:	\$	0.00	\$	0.00 8	0.00
Creditor's Name						
Number Street	Mary Control of the C					
	As of the date you file, the claim is: Check all that apply.					
	Contingent					
City State ZIP Code	Unliquidated					
•	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	An agreement you made (such as mortgage or secured					
Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)					
Debtor 1 and Debtor 2 only	Judgment lien from a lawsuit					
At least one of the debtors and another	Other (including a right to offset)					
Check if this claim relates to a community debt		•				
Date debt was incurred	Last 4 digits of account number 1 2 6 5	MITTING CHAMILLY MAN AND AND AND AND AND AND AND AND AND A	Compagny whether the	EXCLUSIVE MATERIAL PROPERTY OF THE PROPERTY OF		girk-frikann kontinekt-rekrissionen in internationen in i
_ <del>2.2</del> ] n/a	Describe the property that secures the claim:	\$	0.00	\$	0.00 \$	0.00
Creditor's Name						
Alice to a Charles of the Charles of	_					
Number Street	As of the date you file, the claim is: Check all that apply.	J				
- Awaren - A	Contingent					
	Unliquidated					
City State ZIP Code	Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	An agreement you made (such as mortgage or secured					
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit					
At least one of the debtors and another	Judgment lien from a fawsuit  Other (including a right to offset)					
Check if this claim relates to a community debt	Chief (induding a right to disety	•				
Date debt was incurred	Last 4 digits of account number 1 2 6 5					

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Fill in this	information	to identify y	your case:		
Debtor 1	Sheila First Name	R.	Jackson Middle Name	Last Name	
Debtor 2 (Spouse, if filin	ng) First Name		Middle Name	Last Name	
United State	s Bankruptcy C	ourt for the: I	Northern District of III	inois	¥
Case numbe (If known)	er			~~~~~~	

Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	1: List All of Your PRIORITY Unsecure	ed Claims				
2.	each claim listed, identify what type of claim it is. If	editor has more than one priority unsecured claim, list th a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's na Part 1. If more than one creditor holds a particular claim	at clain ame, If , list th	n here and you have i	show both pr more than two	nonty and priority
2.1	Priority Creditor's Name  Number Street  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number		0.00	4-0-4 Mile 2/9/2/9/3 11 - 12 PPA (2000)	The Control of the Co
2.2	n/a Priority Creditor's Name  Number Street  City State ZiP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		0.00	\$	\$ 0.00

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Sheila	R.

Debtor	· 1	Sheila First Name	R. Middle Name	Jackso:	n Document	Page 23 QI 55	known)		
Part					ecured Claims				
					alms against you?				
	No. Y Yes	ou have noti	ning to report in th	is part. Sub	mit this form to the o	court with your other schedules.			
reconstruction	ang and Assessment					day af sha guadisay cuba barda	each claim. If a creditor has	t more th	nan one
no in	onpriori cluded	ty unsecured in Part 1. If n	claim liet the cre	ditor separa ditor holds a	tely for each claim	der of the creditor who holds For each claim listed, identify what the other creditors in Part 3.If y	iat type of claim it is. Do not	npriority	no aneauy
		ank Fresh				Last 4 digits of account numbe	r <u>1 2 6 5</u>	•	86.00
		ty Creditor's Nam				When was the debt incurred?	10/26/2015	Ψ	
	6250 Number	Ridgewood Street	d ROA						
		Cloud		MN	56303	A alaba alaba yazar dila diba atala	n in Chook all that apply		
,	City			State	ZIP Code	As of the date you file, the clair	п і <b>э:</b> Опеск ан так арріу.		
	148 ':	. ف حداث استرونورون	bt? Check one.			Contingent Unliquidated			
		icurrea the action of the control of	SOLE CHECK ONE.			Disputed			
		tor 2 only				·	r alabasa		
		tor 1 and Debt	•	_		Type of NONPRIORITY unsec	eurea ciaim:		
			debtors and another			Student loans  Obligations arising out of a sepa	aration agreement or divorce		
	☐ Che	eck if this clai	im is for a commu	ınity debt		that you did not report as priorit	y claims	_	
	is the c	claim subject	to offset?			Debts to pension or profit-sharing  Other. Specify Installment	ng pians, and other similar debts : Sales Contract	5	
	V No					— Odioi. Opeony			
	CACACAMAN			zwanie za przed pr		Last 4 digits of account numbe	r 1 2 6 5	\$	11,361.00
		of Ed/ Nav				When was the debt incurred?	05/13/2009	*	
		ity Creditor's Nam ox 9635	0						
	Number	Street		FD 4	40770	As of the date you file, the clair	n is: Check all that apply.		
	Wilke	s Barre		PA State	18773 ZIP Code	Contingent			
	•	الساع فرمسورين	nhi? Charl and	••		Unliquidated			
		otor 1 only	ebt? Check one.			☐ Disputed			
	🔲 Deb	otor 2 only				Type of NONPRIORITY unsec	eured claim:		
		otor 1 and Debt		-		Student loans			
			debtors and another			Obligations arising out of a sep	aration agreement or divorce		
			im is for a commu	inity debt		that you did not report as priorit  Debts to pension or profit-shari	ry claims ng plans, and other similar debt	s	
	is the o	claim subject	to offset?			Other. Specify		-	
	Yes	;							
4.3	Gree	nTree & As			may parket for the Marie Commission of the Commi	Last 4 digits of account numbe When was the debt incurred?	r <u>1 2 6 5</u> 03/12/2015	\$	145.00
		ox 460700				when was the dept incurred?			
	Number	Street ndido		CA	92046				
	City	Huluo		State	ZIP Code	As of the date you file, the claim	n is: Check all that apply.		
	Who in	ocurred the d	ebt? Check one.			Contingent Unliquidated			
		otor 1 only				Disputed			
	Det	otor 2 only				•			
		otor 1 and Debt	or 2 only debtors and anothe	r		Type of NONPRIORITY unsec	cured claim:		
						<ul><li>Student loans</li><li>Obligations arising out of a sep</li></ul>	aration agreement or divorce		
			im is for a commu	annty dent		that you did not report as priori	ty claims	-	
	Is the	claim subject	, to onsett			Debts to pension or profit-shari  Other. Specify Bartender	ng pians, and other similar debt School	.o -	

₩ No Yes

Debtor 1

Sheila

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Dove	7
raus	

#### Your NONPRIORITY Unsecured Claims - Continuation Page

3 (M. 1988)						
Afte	r listing any entries on this page, numb	er them be	eginning with 4	.4, followed by 4.5, and so forth.	Tot	al claim
4.4	Capital One Bank			Last 4 digits of account number 1 2 6 5	\$	464.00
	Nonpriority Creditor's Name PO Box 30281			When was the debt incurred? 02/19/2015		
	Number Street	~ (	B4130	As of the date you file, the claim is: Check all that apply.		
	Salt Lake City U		P Code	☐ Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only			u Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only  At least one of the debtors and another			Student loans     Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a community	debt		you did not report as priority claims		
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Banking		
	M No					
	Yes				pergisen berührlikklik	and the second second second second second
4.5	MCSI			Last 4 digits of account number 1 2 6 5	\$	200.00
	Nonpriority Creditor's Name PO Box 327			When was the debt incurred? 03/20/2013		
	Number Street		60463	As of the date you file, the claim is: Check all that apply.		
	Palos Heights IL		IP Code	☐ Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only  At least one of the debtors and another			Student loans		
		dobt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
	Check if this claim is for a community	debi		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify		
	Is the claim subject to offset?			Other. Specify		
i.	Yes				rhebologoppeg	enniberm resishaeladint
4.6	Common Wealth	and the Action of Section 19 Company of Action Section 19 Company of Action 19 Company of Act	and the second configuration of the second configuration o	Last 4 digits of account number 1 2 6 5	\$	362.00
ı	Nonpriority Creditor's Name			When was the debt incurred? 09/14/2014		
	245 Main Street					
	Dickson City P.		18519	As of the date you file, the claim is: Check all that apply.		
	City Sta	ate Zi	IP Code	☐ Contingent ☐ Unliquidated		
	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only			Type of NONPRIORITY unsecured claim:		
	Debtor 2 only  Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a community	/ debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			Other. Specify		
	₩ No					
	Yes				eerses.	

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First Name Middle Name Last Name

Debtor 1

Danie of America			Last 4 digits of account number 1 2 6 5	\$	400.00
Bank of America Nonpriority Creditor's Name			00/04/0046	Ψ	
PO Box 15168			- When was the debt incurred:		
Number Street Wilmington	DE	19850	As of the date you file, the claim is: Check all that apply.		
	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
Debtor 1 only			,		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only  At least one of the debtors and another			<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>		
	فطمام بيكا.		you did not report as priority claims		
Check if this claim is for a commun	nty debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Banking		
Is the claim subject to offset?			Other. Specify Surriving		
☑ No □ Yes					
				ones-Asimsimphisti	A STATE OF THE PARTY OF THE PAR
			Last 4 digits of account number 1 2 6 5	\$	300.0
TCF Bank Nonpriority Creditor's Name					
15350 Cedar Ave			When was the debt incurred? 03/01/2016		
Number Street	N AN I	EEAOA	As of the date you file, the claim is: Check all that apply.		
Apple Valley	MN State	55124 ZIP Code	Contingent		
•			☐ Unliquidated		
Who incurred the debt? Check one.			☐ Disputed		
Debtor 1 only			Type of NONPRIORITY unsecured claim:		
Debtor 2 only Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a commun	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
is the claim subject to offset?	-		Other. Specify Banking		
No			•		
Yes					
	er et kompleter komplete komp			\$	400.0
Chase			Last 4 digits of account number 1 2 6 5		
Nonpriority Creditor's Name			When was the debt incurred? 03/01/2016		
92 E. 103rd St Number Street			As of the date you file, the claim is: Check all that apply.		
Chicago	IL	60628			
City	State	ZIP Code	Contingent Unliquidated		
Who incurred the debt? Check one.			Disputed		
Debtor 1 only			•		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
<ul> <li>Debtor 1 and Debtor 2 only</li> <li>At least one of the debtors and another</li> </ul>			<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>		
			you did not report as priority claims		
Check if this claim is for a commu	nity debt		<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify Banking</li> </ul>		
Is the claim subject to offset?			Other, Specify Detribing		
☑ No					

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Debtor 1

Shiela

R. Jackson Middle Name

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Case number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Last Name

Afte	er listing any entries on this page, r	number th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
5.0	Comcast			Last 4 digits of account number 1 2 6 5	s 600.0
	Nonpriority Creditor's Name PO Box 3002	· · · · · · · · · · · · · · · · · · ·		When was the debt incurred? 03/01/2016	\$
	Number Street				
	Southeastern	PA	19398	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only			Type of NONDRIGHTY uppergred deliver	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	er		<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	
	☐ Check if this claim is for a comm	unity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify Utility	
	☑ No □ Yes				
5.1	and control of the second seco	мүзэвчийн үүлжий хосийн их хосийн хосийн Хосийн хосийн хосий	ann an an an Aran Bankara (Aran Bankara) (Aran Aran Aran Aran Bankara) (Aran Bankara Aran Bankara (Aran Bankar Bankara (Aran Bankara) (Aran Bankara) (Aran Bankara) (Aran Bankara) (Aran Bankara) (Aran Bankara) (Aran Bankar		ng una es passo e sentimente negacionelo el cossillo del la
	Nicor			Last 4 digits of account number 1 2 6 5	\$ 1,200.0
	Nonpriority Creditor's Name			When was the debt incurred? 03/01/2016	
	PO Box 0632 Number Street			When was the debt incurred?	
	Aurora	IL	60507	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and anothe	r		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	Check if this claim is for a commu	unity deht		you did not report as priority claims	
	is the claim subject to offset?	,		Debts to pension or profit-sharing plans, and other similar debts	
	No			☑ Other Specify Utility	
	Yes				
.2	US Cellular	NO-TONEROUS SERVICE AND	neimborg gamelgature (menginelgat des frein eine de sand de andere de Constitute de Perencie des Constitutes C	Last 4 digits of account number 1 2 6 5	\$680.00
	Nonpriority Creditor's Name			00/04/0040	
	Dept 0205 Number Street			When was the debt incurred? 03/01/2016	
	Palatine	IL	60055	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another	-		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	nity debt		you did not report as priority claims	
	s the claim subject to offset?	-		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Cellular	
	☑ No ☐ Yes			Other. Specify Ochulai	

Case 16-14044

Doc 1

Debtor 1

Sheila

R.

Jackson

Document

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Last Name

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#### Your NONPRIORITY Unsecured Claims — Continuation Page

Sprint			Last 4 digits of account number 1 2 6 5	4	320.
Nonpriority Creditor's Name 6391 Sprint Parkway			When was the debt incurred? 03/01/2016	3	
Number Street					
Overland Park	KS	66251	As of the date you file, the claim is: Check all that apply.		
City  Who incurred the debt? Chec	State	ZIP Code	☐ Contingent ☐ Unfliquidated ☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only  At least one of the debtors ar	- d M		☐ Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for	a community debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset	?		Other. Specify Cellular		
☑ No ☐ Yes					
Illinois Tollway	ann an t-aireann an	MERCHES AND ARTS AND ARTS SELECT SELECT SERVICES SELECT SERVICES AND SELECT SELECT SERVICES AND SELECT SERVICES AND SELECT SELECT SERVICES AND SELECT SERVICES AND SEL	Last 4 digits of account number 1 2 6 5		400.0
Nonpriority Creditor's Name				Φ	-400.
2700 Ogden Ave			When was the debt incurred? 03/01/2016		
Number Street  Downers Grove	11	60545	As of the date you file, the claim is: Check all that apply.		
City	IL State	60515 ZIP Code	Contingent		
			☐ Unliquidated		
Who incurred the debt? Chec	k one.		☐ Disputed		
Debtor 1 only Debtor 2 only			Town of MONDRIO DITTY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors an	d another		Student loans		
☐ Check if this claim is for a	community debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
No	•		Other. Specify Tolls		
Yes					
City of Country Club Hil	end-o-thickerschiederschiederscher seiner Archeiderschiederschiederschiederschiederschiederschiederschiedersch	negonalgis. Agus in mid geleration er erre enterera model processus modelscalar.	Last 4 digits of account number $1 265$	\$	200.0
Nonpriority Creditor's Name	I	****	00(04)0040		
4200 183rd St			When was the debt incurred? 03/01/2016		
Country Club Hills	IL	60478	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check	( 000		Unliquidated		
Debtor 1 only	. one.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and	d another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt		you did not report as priority claims		
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts  ☑ Other. Specify Tickets		
☑ No			Carlett Specify Frontier		
Yes					

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Debtor 1

Sheila

R. Middle Name Jackson Document

Part 2:

#### Your NONPRIORITY Unsecured Claims — Continuation Page

		**.		
J St. James Hospital	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		Last 4 digits of account number 1 2 6 5	\$800.0
Nonpriority Creditor's Name 1423 Chicago Rd			When was the debt incurred? 03/01/2016	
Number Street Chicago Heights	IL	60411	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
Who incurred the debt? Check Debtor 1 only	one.		☐ Unliquidated ☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only  At least one of the debtors and			☐ Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify Medical	
Yes				
Ingalls Hospital	companies so recurrence assemblementament de medicantida de la substitute de la companie de referencia en estr	is Kylek keleminin per anjua manan mimatan Timbak de Nadales 1942 bilan 1942 bilan 1942 bilan 1942 bilan 1943 bilan 1944	Last 4 digits of account number 1 2 6 5	s 500.0
Nonpriority Creditor's Name		<del>*************************************</del>	00/04/0040	ş <del>000.0</del>
One Ingalls Drive		<u>, , , , , , , , , , , , , , , , , , , </u>	When was the debt incurred? 03/01/2016	
Harvey	IL	60426	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one.		☐ Unliquidated☐ Disputed	
Debtor 1 only			<b>L</b> disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only  At least one of the debtors and	another		Student loans	
_			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?			Other. Specify Medical	
Yes				
100 тобор 453 тында Афиядына шана кекенерин кенерин кенерин кара жана ашыштарын кеңерде	electer metert, a commerce terrence expression and head of the commendence of the commendence of the comment of	nastrok krozeniczyck palaciek pry a nejszek inguszy kany asymptoka sacen	Last 4 digits of account number 1 2 6 5	\$ 2,050.00
Housing Authority Nonpriority Creditor's Name			TOTAL THE STATE OF	
3210 W 139th St	**************************************		When was the debt incurred? 03/01/2016	
Robbins	<b>↓</b> ∟	60472	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one.		☐ Unliquidated☐ Disputed	
☑ Debtor 1 only			- Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only  At least one of the debtors and	another		Student loans	
Check if this claim is for a c			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Is the claim subject to offset?	omnumity debt		Debts to pension or profit-sharing plans, and other similar debts	
No Yes			Other. Specify Landlord	

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Debtor 1

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

9 Americash			Last 4 digits of account number 1 2 6 5 \$						
Nonpriority Creditor's Name 14647 S. Cicero Ave			When was the debt incurred? 03/01/2016						
Number Street Midlothian	<b>!L</b>	60445	As of the date you file, the claim is: Check all that apply.						
Who incurred the debt? Chec Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this claim is for a	State  k one.  Indicate the state of the sta	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Loan						
☑ No ☐ Yes									
Plain Green Loans		constance of the second	Last 4 digits of account number 1 2 6 5	\$	200.00				
Nonpriority Creditor's Name 93 Mack Rd Suite 600			When was the debt incurred? 03/01/2016						
Number Street Box Elder	MT	59521	As of the date you file, the claim is: Check all that apply.						
City  Who incurred the debt? Chec	State	ZIP Code	Contingent Unliquidated Disputed						
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	d another		Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
☐ Check if this claim is for a ls the claim subject to offset?  ☑ No ☐ Yes	*		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Loan						
Cook County Forest Pre	and the second s	enskryds and have have de abblance bedaard he have bedaard he have bedaal bedaard he have bedaal bedaard he have bedaard he ha	Last 4 digits of account number 1 2 6 5	\$	600.00				
Nonpriority Creditor's Name 536 North Harlem Ave			When was the debt incurred? 03/01/2016						
Number Street River Forest	IL	60305	As of the date you file, the claim is: Check all that apply.						
City  Who incurred the debt? Check	State cone.	ZiP Code	Contingent Unliquidated Disputed						
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:  Student loans						
At least one of the debtors an			Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts						
Is the claim subject to offset?  ☑ No ☑ Yes	•		other. Specify Tickets						

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Debtor 1

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

No.					
Aft	er listing any entries on this page, number the	m beginning wi	th 4.4, followed by 4.5, and so forth.	Tota	l claim
	Chex System		Last 4 digits of account number 1 2 6 5	\$	0.00
	Nonpriority Creditor's Name 7805 Hudson Rd		When was the debt incurred? 03/01/2016		
	Number Street Woodberry MN	55125	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No Yes	ZIP Code	<ul> <li>Contingent</li> <li>Unliquidated</li> <li>Disputed</li> </ul> Type of NONPRIORITY unsecured claim: <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify Old Accounts</li> </ul>		
	Equifax Bankruptcy Dept.	n-стан ( тичний сом станова на той на той сом станова на той на той сом станова на той сом станова на той сом с	Last 4 digits of account number 1 2 6 5	\$	0.00
	Nonpriority Creditor's Name P.O. Box 740241	***************************************	When was the debt incurred? 03/01/2016		
	Number Street	30374	As of the date you file, the claim is: Check all that apply.		
	Atlanta GA City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		☐ Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
	is the claim subject to offset?		Other. Specify Notice Only		
	<ul><li>✓ No</li><li>☐ Yes</li></ul>				
	Experian Bankruptcy Dept.	VICEO SANCIVICA E ESCUPEZACIONISA CANCIASO MOVIMINATIVI	Last 4 digits of account number 1 2 6 5	\$	0.00
	Nonpriority Creditor's Name	······································	When was the debt incurred? 03/01/2016		
	P.O. Box 2002		When was the debt incurred? U3/01/2010		
	Number Street Allen TX	75013	As of the date you file, the claim is: Check all that apply.		
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts		
	ls the claim subject to offset?  ☑ No ☐ Yes		Other. Specify Notice Only	•	
					,

Debtor 1

First Name

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, n	minner (V	anı bağınınıng Wil	ni www, rollowed by 4.5, and so forth.	Total claim
Trans Union Bankruptcy Dep	it.		Last 4 digits of account number 1 2	<u>6 5</u> <u>\$ 0.00</u>
Nonpriority Creditor's Name P.O. Box 1000			When was the debt incurred? 03/01/20	016
Number Street Chester	PA	19022	As of the date you file, the claim is: Check a	ill that apply.
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and another	er		Obligations arising out of a separation agreer	ment or divorce that
Check if this claim is for a comm	unity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and	other similar debts
Is the claim subject to offset?			☑ Other, Specify Notice Only	
<b>l⊻</b> No □ Yes				
Certegy Check Service		g gyang gang magyang jang jang jang jang mahana kamah ang kalipink dipink dipink dipink dipink dipink dipink d	Last 4 digits of account number 1 2 _	<u>6 5 \$ 0.00</u>
Nonpriority Creditor's Name			When was the debt incurred? 03/01/20	)16
P.O. Box 30046  Number Street				<del></del>
Tampa	FL	33630	As of the date you file, the claim is: Check a	Il that apply.
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only  At least one of the debtors and anothe	r		Student loans	
			<ul> <li>Obligations arising out of a separation agreed you did not report as priority claims</li> </ul>	nent or divorce that
Check if this claim is for a commi	unity debt		Debts to pension or profit-sharing plans, and	other similar debts
is the claim subject to offset?			☑ Other. Specify Notice Only	
<b>☑</b> No ☐ Yes				
	***************************************	ang pang isang Mangsilon (planeman menilonisi Sisinisia da da Palabadan) pisikalikan da pelapangan da	Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street		·····	As of the date you file, the claim is: Check al	I that apply.
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated Disputed	
Debtor 1 only			- Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another			Obligations arising out of a separation agreen you did not report as priority claims	nent or divorce that
Check if this claim is for a community	ınity debt		Debts to pension or profit-sharing plans, and	other similar debts
Is the claim subject to offset?			Other. Specify	<del> </del>
□ No				
Yes				

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Debtor 1

Sheila

Middle Name

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Case number (# known)

Part 3:

#### List Others to Be Notified About a Debt That You Already Listed

n/a			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
Number Str	eet		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Namber St	eet		Part 2: Creditors with Nonpriority Unsecured Claim
			Last 4 digits of account number
City	State	ZiP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
tuino			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Str	eet .		Part 2: Creditors with Nonpriority Unsecured
**************************************		Andrew Market Company of the Company	Claims
City	State	ZIP Code	Last 4 digits of account number
NEWSTANDARD STATES AND	minded-to-to-han communication former in annual medication of the total medication of the hand he will be resident to the second second	orace oracional and interest interest in the principal property of the first and places, a many legisla	On which entry in Part 1 or Part 2 did you list the original creditor?
ame		<del></del>	<u>_</u>
lumber Stre	a a t		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
- Sur			Part 2: Creditors with Nonpriority Unsecured Claims
14.		772	Last 4 digits of account number
ity	State  State	ZIP Code	
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
umber Stre		<del> </del>	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber Stre	ख		Part 2: Creditors with Nonpriority Unsecured Claims
		***************************************	Last 4 digits of account number
ity ************************************	State  Scarce  State	ZIP Code	Last 4 digits of account number
ame		······································	On which entry in Part 1 or Part 2 did you list the original creditor?
Cis 110			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber Stre	et		☐ Part 2: Creditors with Nonpriority Unsecured
	<u> </u>		Claims
ity	State	ZIP Code	Last 4 digits of account number
enemanical distriction of the second		TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	On which entry in Part 1 or Part 2 did you list the original creditor?
ame			
umber Stre	et .		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
			Claims
	······································	7ID 0-4	Last 4 digits of account number
ty Mariementalises mercinalises the ex	State  State	ZIP Code	On which and the in Paris 4 or Paris 6 did not be a first and the control of the
ame		······································	On which entry in Part 1 or Part 2 did you list the original creditor?
imber Stre	et .		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
ty	State	ZIP Code	Last 4 digits of account number

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Debtor 1

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a.	Domestic support obligations	6a.	\$	0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
ada tang na ang kabupatan da saka s				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	11,361.00
Total claims from Part 2	6g.	Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim  \$	11,361.00
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority		**************************************	·
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.	\$ \$	0.00

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Fill in this in	nformation to ide	ntify your case:		114 - 411
Debtor	Sheila	R	Jackson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse If filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District of	Illinois	
Case number	***************************************			

☐ Check if this is an amended filing

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company wi	th whom you	have the contract or lease	State what the contract or lease is for		
2.1	Caron	arroll			Residential month-to-month lease.		
A manufacture management	Name 316 Og	lesby Ave					
	Number Calume	Street et City	IL	60409			
President A	City	dyna, ná pánya franciara kémencsémű vent sáljodnása.	State	ZIP Code			
2.2	n/a						
	Name				nte-facility		
NAMES OF TAXABLE PARTY.	Number	Street	- 1960-1970 - 1974 - 1977 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974 - 1974				
	City	San Calle Calle College of the Called Colleg	State	ZIP Code			
2.3	n/a						
A VALUE AND STREET	Name						
	Number	Street					
enorements state	City		State	ZIP Code			
2.4	n/a						
	Name	-to-article to the transfer of		and the second s	and the state of t		
	Number	Street		· · · · · · · · · · · · · · · · · · ·			
mmamora,n.	City		State	ZIP Code			
2.5	n/a						
	Name				<del></del>		
	Number	Street	<del></del>				
The Village of the Vi	City		State	ZIP Code	<del></del>		

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Debtor 1	Sheila	Sheila R		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filin	ng) First Name	Middle Name	Last Name	***************************************
United State	s Bankruptcy Court	for the: Northern District of	Illinois	V
Case numbe	<b>5</b> r			

☐ Check if this is an amended filing

### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

r		are ming a joint odder, do not	list either spouse a	as a codebi	tor.;
Yes					
2. Within the	e last 8 years, have you live alifornia, Idaho, Louisiana, N				inity property states and territories include nd Wisconsin.)
No. Go	to line 3.				
Yes. D	id your spouse, former spous	se, or legal equivalent live w	ith you at the time	?	
☐ No	i I				
☐ Yes	s. In which community state of	or territory did you live?		Fill in the	name and current address of that person.
Nar	me of your spouse, former spouse, or	legal equivalent		-	
Nur	mber Street			-	
City	<u>,</u>	State	ZIP Code	-	
•	•				pouse is filing with you. List the person
A				<b>~</b> -	
7	: Your codebtor				lumn 2: The creditor to whom you owe the debt
.1 n/a	: Your codebtor			Ch	lumn 2: The creditor to whom you owe the debt
7	: Your codebtor			Ch	lumn 2: The creditor to whom you owe the debt neck all schedules that apply:
.1 n/a	: Your codebtor			Ch	lumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line
.1 n/a		State	ZIP Code	Ch	lumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line    Schedule E/F, line
n/a Name		State	ZIP Code	Ch	lumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule G, line
.1 n/a Name Number City		State	ZIP Code	Ch	lumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule G, line
.1 n/a Name  Number  City  2 n/a Name	Street	State	ZIP Code	Ch	Jumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule D, line    Schedule D, line
n/a Name Number City 2		State	ZíP Code	Ch	lumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule G, line
.1 n/a Name  Number  City  2 n/a Name	Street	State	ZIP Code	Ch	Jumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule D, line    Schedule D, line
.1 n/a Name Number City .2 n/a Name Number	Street			Ch	Jumn 2: The creditor to whom you owe the debt leck all schedules that apply:    Schedule D, line   Schedule G, line   Schedule D, line   Schedule D, line   Schedule D, line   Schedule E/F, line
.1 n/a Name  Number  City  2 n/a Name  Number  City  City  3	Street			Ch	Jumn 2: The creditor to whom you owe the debt leck all schedules that apply:    Schedule D, line   Schedule E/F, line   Schedule D, line   Schedule E/F, line   Schedule G, line   Schedule G, line
Number City  1	Street			Ch	Jumn 2: The creditor to whom you owe the debt neck all schedules that apply:    Schedule D, line   Schedule E/F, line   Schedule D, line   Schedule D, line   Schedule G, line   Schedule E/F, line   Schedule D, line
n/a Name  Number  City  1 n/a Name  Number  City  1 n/a Name  Number  City  3 n/a	Street			Ch	Jumn 2: The creditor to whom you owe the debt leck all schedules that apply:    Schedule D, line   Schedule E/F, line   Schedule D, line   Schedule E/F, line   Schedule G, line   Schedule G, line

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Fill in this information to identify	your case:					
Debtor 1 Sheila First Name		ckson				
Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name	1			
United States Bankruptcy Court for the:	Northern District of Illinois					
Case number (if known)	***************************************		-	Check if the	his is: ended filing	
					ended liling Diement showing postpetit	on chapter 13
Off-1-1 F 4001					e as of the following date:	<b></b>
Official Form 106I	_			MM / D	D/ YYYY	
Schedule I: You	ir Income					12/15
Be as complete and accurate as possupplying correct information. If you are separated and your spouseparate sheet to this form. On the  Part 1: Describe Employm	ou are married and not fili ise is not filing with you, top of any additional pag	ing jointly, and ye do not include in	our spouse is formation abo	living with your spor	ou, include information abouse. If more space is neede	out your spouse.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing s	pouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<ul><li></li></ul>	/ed	ANGER AN	☐ Employed ☐ Not employed	NO THE MENT AND
Include part-time, seasonal, or self-employed work.						
Occupation may include student or homemaker, if it applies.	Occupation	Assistant Ma	nager		***************************************	
	Employer's name	Sonic Drive I	n		Charles and the second	
	Employer's address	4023 167th S	St.			
		Number Street			Number Street	
		Country Club	State ZIP 0	60478 Code	City State	ZIP Code
	How long employed then	e? 1 Year			1 Year	
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of t	he date you file this form	. If you have nothi	ng to report fo	r any line, writ	te \$0 in the space. Include yo	ur non-filing
If you or your non-filing spouse have below. If you need more space, att			rmation for all	employers for	that person on the lines	
			For	Debtor 1	For Debtor 2 or non-filing spouse	
<ol><li>List monthly gross wages, sala deductions). If not paid monthly, or</li></ol>			2. <u>\$_1</u>	,238.00	\$	
3. Estimate and list monthly overt	ime pay.		3. +\$	0.00	+ \$	
4. Calculate gross income. Add line	e 2 + line 3.		4. \$ 1	,238.00	\$	

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Debtor 1

Sheila

Last Name

Case number (if known)

		Fo	r Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	<b>→</b> 4.	\$	1,238.00	\$
List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$	166.00	\$
5b. Mandatory contributions for retirement plans	5b.	-	0.00	\$
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$
5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$
5e. Insurance	5e.	\$	0.00	\$
5f. Domestic support obligations	5f.	\$	0.00	\$
5g. Union dues	5g.	\$	0.00	\$
5h. Other deductions. Specify: n/a	5g. 5h.	+\$	0.00	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.		\$	166.00	\$ <sub></sub>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,072.00	\$
. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$
8b. Interest and dividends	8b.	\$	0.00	\$
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	nt	· ·		* and the state of
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	660.00	\$
8d. Unemployment compensation	8d.	\$	0.00	\$
8e. Social Security	8e.	\$	0.00	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Food Stamps		<b>c</b> t	617.00	e
	8f.	Φ		Φ
8g. Pension or retirement income	8g.	\$	0.00	\$
8h, Other monthly income. Specify: n/a	8h.	+\$	0.00	+\$
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	1,277.00	\$
Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,349.00	\$
State all other regular contributions to the expenses that you list in <i>Sched</i> include contributions from an unmarried partner, members of your household, y friends or relatives.			ents, your room	mates, and other
Do not include any amounts already included in lines 2-10 or amounts that are r Specify; Food Stamps	not av	ailable	to pay expens	es listed in <i>Schedule J</i> .  11. + \$ 0.00
Add the amount in the last column of line 10 to the amount in line 11. The selection white that amount on the Summary of Your Assets and Liabilities and Certain Selection 11.				plies 12. \$\frac{\$ 2,349.00}{\$ Combined}\$
B. Do you expect an increase or decrease within the year after you file this fo	orm?			monthly income
Yes. Explain:		•		

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Fill in this information to identif	y your case:			
Debtor 1 Sheila	R Jackson	Check i	f this is:	
Debtor 2	Middle Name Last Name			
(Spouse, if filing) First Name	Middle Name Last Name	1	imended filing	ing postpetition chapter 13
United States Bankruptcy Court for the	Northern District of Illinois		enses as of the t	
Case number(If known)		MM /	DD / YYYY	
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ossible. If two married people are fil led, attach another sheet to this forn	ling together, both are equall n. On the top of any addition	y responsible fo al pages, write y	r supplying correct our name and case number
Part 1: Describe Your Ho	usehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
☐ No ☐ Yes. Debtor 2 must fi	le Official Form 106J-2, Expenses for S	Separate Household of Debtor	2.	
2. Do you have dependents?	No			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Depen age	dent's Does dependent live with you?
Do not state the dependents' names.	·	Son	15	☐ No — ☑ Yes
		Daughter	13	□ No ☑ Yes
		Son		☐ No <b>☑</b> Yes
		Daughter	2	□ No
		•	_	── <b>☑</b> Yes □ No
	en e	Son	<u>2</u>	Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes			
Part 2: Estimate Your Ongo	ng Monthly Expenses		A 1 Mr - AAN SAMMA MATTER	TVVVANA VARIOUS AND STATE IV ABOUT Assessment and subject to subject to design the subject to th
	bankruptcy filing date unless you a	re using this form as a supp	lement in a Chap	oter 13 case to report
	kruptcy is filed. If this is a supplement			
	-cash government assistance if you		4.	
	I it on Schedule I: Your Income (Offi	•		ur expenses
any rent for the ground or lot.	expenses for your residence. Include	tirst mortgage payments and	4. \$	1,100.00
If not included in line 4:				0.00
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or re			4b. \$	0.00
4c. Home maintenance, repair, a	and upkeep expenses		4c. \$	0.00
4d. Homeowner's association or	condominium dues		4d. \$	0.00

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Debtor 1 Sheila R Jackson Case number (# known)\_\_\_\_\_\_

			Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	<b>5</b> .	\$	0.00
	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$100	0.00
1	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ <u>150</u>	0.00
	6d. Other Specify:	6d.	\$	0.00
7.		7.	\$550	0.00
8.	Childcare and children's education costs	8.	\$100	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$50	0.00
10.	Personal care products and services	10.	\$100	0.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.	12.	\$	0.00
	Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books	13.	s 50	0.00
13.		14.	\$	0.00
14.	Charitable contributions and religious donations		7	
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			0.00
	15a. Life insurance	15a.	Ψ	0.00
	15b. Health insurance	15b.	Ψ	0.00
1	15c. Vehicle insurance	15c.	Ψ	5.00 0.00
:	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	0.00
: 17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	Ψ	0.00
	17b. Car payments for Vehicle 2	17b.	Ψ	0.00
	17c. Other. Specify:	17c.	Ψ	0.00
	17d. Other. Specify:	17d.	\$	0.00
-18.	that you did not report as deducted from	18.	\$	0.00
40	Other payments you make to support others who do not live with you.			
19.	Specify:	19.	\$	0.00
		10		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		\$	0.00
	20a. Mortgages on other property	20a.		0.00
÷	20b. Real estate taxes	20b.	Y	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	Ψ	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	<u> </u>	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	<u> </u>

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Calculate your monthly expenses.  22a. Add lines 4 through 21.			
		1	
•	22a.	<b>S</b>	2,485.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0,00
22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	2,485.00
			A TO THE TOTAL PROPERTY OF THE TOTAL PROPERT
Calculate your monthly net income.		\$	2,349.00
3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	<b>V</b>	
3b. Copy your monthly expenses from line 22c above.	23b.	- \$	2,485.00
3c. Subtract your monthly expenses from your monthly income.		\$	-136.00
The result is your monthly net income.	23c.		
Do you expect an increase or decrease in your expenses within the year after you file this for example, do you expect to finish paying for your car loan within the year or do you expect your nortgage payment to increase or decrease because of a modification to the terms of your mortgage			
<b>d</b> No.			adegak adesak sa katalon da a da
Yes. Explain here:			

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Sheila	R	Jackson	
	First Name	Middle Name	Last Name	
Debtor 2			**************************************	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	r the: Northern District	of Illinois	¥
Case number (If known)			<del>.</del>	

#### Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Vhat is your current marital status?			
☐ Married			
Not married			
Ouring the last 3 years, have you lived anywher	e other than where	you live now?	
No No			
Yes. List all of the places you lived in the last 3	tosa i companiani del Productione		1868: 1870 American IV. Jersel
Debtor 1:	Dates Debtor flived there	1 Debtor 2:	Dates Debtor 2 lived there
		Same as Debtor 1	Same as Debtor
	From		From
Number Street	То	Number Street	То
L. Particular de la company de	******		***************************************
City State ZIP Code	attuate	City State ZIP Code	and the state of t
Street freeziste with the secretary property and secretary property and second secretary and second secretary secretaries and the second secon		☐ Same as Debtor 1	☐ Same as Debtor
	From		From
Number Street	То	Number Street	То
	_		_
		City State ZIP Code	_

Part 2: Explain the Sources of Your Income

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or 1	Sheila First Name	R Middle Name Las	Jackson Il Name	Case no	umber (if known)	
Fill ir	n the total amoun	nt of income you receive	ed from all jobs and all bu	business during this yea usinesses, including part-ti gether, list it only once und		ndar years?
	No					
₩ Y	es. Fill in the de	tails.				
			Debtor 1		Debtor 2	
			Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)
		of current year until ad for bankruptcy:	Wages, commission bonuses, tips  Operating a busines	\$ 4,952.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calenda		☑ Wages, commission	s.	☐ Wages, commissions.	
		cember 31, <u>2014</u>	bonuses, tips )    Operating a busines	\$0,00	bonuses, tips  Operating a business	\$
	For the calenda	r year before that:	☑ Wages, commissions	n, a,, a,,,	☐ Wages, commissions,	
		•	bonuses, tips	\$0.00	bonuses, tips	\$
Did y Includen unem gamb	you receive any de income regard nployment, and o bling and lottery v	dless of whether that in- ther public benefit payn winnings. If you are filing	ments; pensions; rental in g a joint case and you ha	vious calendar years? es of other income are alin come; interest; dividends; ove income that you receiv	mony; child support; Social S money collected from laws red together, list it only once	uits; royalties; and
Did y Includent gamb List e	you receive any de income regard nployment, and o pling and lottery v each source and	other income during to dless of whether that inc ther public benefit payn winnings. If you are filing the gross income from the	this year or the two pred come is taxable. Example ments; pensions; rental in g a joint case and you ha	vious calendar years? es of other income are alin come; interest; dividends;	mony; child support; Social S money collected from laws red together, list it only once	uits; royalties; and
Did y Includent gamb List e	you receive any de income regard aployment, and o bling and lottery weach source and	other income during to dless of whether that inc ther public benefit payn winnings. If you are filing the gross income from the	this year or the two pred come is taxable. Example ments; pensions; rental in g a joint case and you ha	vious calendar years? es of other income are alin come; interest; dividends; ove income that you receiv	mony; child support; Social S money collected from laws red together, list it only once	uits; royalties; and
Did y nclud unem gamb uist e	you receive any de income regard nployment, and o pling and lottery v each source and	other income during to dless of whether that inc ther public benefit payn winnings. If you are filing the gross income from the	this year or the two prescome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.	vious calendar years? es of other income are alin icome; interest; dividends; ive income that you receiv Do not include income tha  Gross Income from each source (before deductions and	nony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and
Did y Incluunem gamb List e	you receive any de income regard apployment, and o bling and lottery weach source and do do do do do fes. Fill in the det	other income during to dless of whether that in- ther public benefit payn winnings. If you are filing the gross income from ails.	this year or the two precome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.	crious calendar years? The set of other income are aliminated as interest; dividends; over income that you receive the income that you receive the income that the income that the income that income from each source (before deductions and exclusions)	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and
Did y Incluunem gamb List e	you receive any de income regard apployment, and o bling and lottery weach source and do do do do do fes. Fill in the det	other income during t dless of whether that in ther public benefit payn winnings. If you are filing the gross income from a ails.	this year or the two prescome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.	cross income from each source (before deductions and exclusions)  \$\begin{array}{cccccccccccccccccccccccccccccccccccc	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and
Did y ncluunem gamb List e	you receive any de income regard apployment, and o bling and lottery weach source and do do do do do fes. Fill in the det	other income during to dless of whether that in- ther public benefit payn winnings. If you are filing the gross income from ails.	this year or the two precome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.	crious calendar years? The set of other income are aliminated as interest; dividends; over income that you receive the income that you receive the income that the income that the income that income from each source (before deductions and exclusions)	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and
Did y Incluunen gamb List e	you receive any de income regard nployment, and o pling and lottery v each source and t lo Yes. Fill in the det From January 1 the date you file	other income during to diess of whether that in- ther public benefit payn winnings. If you are filing the gross income from a sails.	this year or the two prescome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.  Food Stamps Child Support	Gross Income from each source (before deductions and exclusions)  \$\frac{617.00}{5.000}\$	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and
Did y Incluunem gamb List e	you receive any de income regard apployment, and o bling and lottery weach source and do fes. Fill in the det  From January 1 the date you file  For last calenda	other income during to diess of whether that in- ther public benefit payn winnings. If you are filing the gross income from a sails.	this year or the two prescome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.  Food Stamps Child Support	cross Income from each source (before deductions)  \$\frac{617.00}{5.000}\$  \$\frac{660.00}{5.000}\$	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and exclusions)  \$
Did y Inclu uner gamb List e	you receive any de income regard apployment, and o bling and lottery weach source and do fes. Fill in the det  From January 1 the date you file  For last calenda	other income during to diess of whether that in- ither public benefit payn winnings. If you are filing the gross income from a ails.  of current year until ed for bankruptcy:	this year or the two prescome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.  Food Stamps Child Support	cross Income from each source (before deductions)  \$\frac{617.00}{5.000}\$  \$\frac{660.00}{5.000}\$	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and exclusions)  \$
Did y Incluunem gamb List e	you receive any de income regard nployment, and o pling and lottery v each source and t lo Yes. Fill in the det From January 1 the date you file For last calenda (January 1 to De	other income during to diess of whether that in- ither public benefit payn winnings. If you are filing the gross income from a ails.  of current year until ed for bankruptcy:	this year or the two prescome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.  Food Stamps Child Support	cross Income from each source (before deductions)  \$\frac{617.00}{5.000}\$  \$\frac{660.00}{5.000}\$	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and exclusions)  \$
Did y Incluunen gamb List e	you receive any de income regard nployment, and o pling and lottery v each source and t lo Yes. Fill in the det From January 1 the date you file For last calenda (January 1 to De	other income during to diess of whether that interpublic benefit paymentings. If you are filing the gross income from the gross inco	this year or the two prescome is taxable. Example nents; pensions; rental in g a joint case and you hat each source separately.  Debtor 1  Sources of Income Describe below.  Food Stamps Child Support	crious calendar years?  ses of other income are aline income; interest; dividends; ove income that you receive the	mony; child support; Social S money collected from laws red together, list it only once it you listed in line 4.  Debtor 2  Sources of Income Describe below.	uits; royalties; and under Debtor 1.  Gross Income from each source (before deductions and exclusions)  \$

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btor 1	Sheila	R		kson		Case nur	mber (if known)		
	First Name	Middle Name	Last Name						
Part 3:	List Certa	in Payments Yo	u Made Befo	re You Filed f	or Bankrı	iptcy			
. Are elt	her Debtor 1'	s or Debtor 2's de	bts primarily c	onsumer debts	?				
□ No	. Neither De	btor 1 nor Debtor	2 has primarily	consumer deb	ts. Consum	er debts are	defined in 11 l	J.S.C. § 101(8	3) as
	"incurred by	an individual prima	arily for a perso	nal, family, or ho	usehold pu	rpose."			
	_	90 days before you	filed for bankru	ptcy, did you pay	any credite	or a total of \$6	6,425* or more	<del>)</del> ?	
	No. Go	to line 7.							
	tot	t below each credit al amount you paid ld support and alim	that creditor. D	o not include pay	yments for o	iomestic supp	oort obligation	s, such as	
		adjustment on 4/0	-						
☑ Ye:	s. Debtor 1 o	Debtor 2 or both	have primarily	consumer deb	ts.				
	During the 9	30 days before you	filed for bankru	ptcy, did you pay	any credito	or a total of \$6	600 or more?		
	☑ No. Go	to line 7.							
		t below each credit							
		ditor. Do not includ nony. Also, do not						d	
		-		4.45%	TROMASON HESSANDERS	den el	· 06 000 0 (\$100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Kanada kanad
				Dates of payment	Total amou	ınt paid	Amount you	still owe	Was this payment for
					\$	0.00	¢.	0.00	Б
	Creditor*	s Name		***************************************	Φ		Φ		☐ Mortgage ☐ Car
									Credit card
	Number	Street							Loan repayment
				<del></del>					Suppliers or vendors
	City	State	ZIP Code						Other
		And Management of Sales and the second of th	H		w				
					\$	0.00	\$	0.00	☐ Mortgage
	Creditor	s Name							Car
	Number	Street							Credit card
									Loan repayment
	MIN. 1.1.								Suppliers or vendors
	City	State	ZIP Code						Other
								Notation and the second second	
	ar formation a series				\$	0.00	\$	0.00	Mortgage
	Creditor's	s Name		<u></u>	\$	0.00	\$	0.00	☐ Mortgage
				***************************************	\$	0.00	\$	0.00	
	Creditor's				\$	0.00	\$	0.00	Car Credit card Loan repayment
					\$	0.00	\$	0.00	Car

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btor 1	Sheila	R	Jackson	Case number (if known)
	First Name	Middle Name La	st Name	
Insid corp ager such	ders include your orations of which nt, including one f n as child support	relatives; any general you are an officer, dir for a business you ope	partners; relatives of an ector, person in control,	payment on a debt you owed anyone who was an insider?  by general partners; partnerships of which you are a general partner;  or owner of 20% or more of their voting securities; and any managing  r. 11 U.S.C. § 101. Include payments for domestic support obligations,
<u>a</u>				
U \	es. List all paym	ents to an insider.	Dates of payment	Total amount
				s 0.00 s 0.00
	Insider's Name			Φ
	Number Street	Land to the state of the state	-	
				-
	City	State ZI	P Code	s 0.00 s 0.00
	Insider's Name			
	Number Street			
		<del></del>		
	City	State ZII	Code	a source control of the source control of th
an ir	sider?	you filed for bankrup debts guaranteed or co		payments or transfer any property on account of a debt that benefited
<b>5</b> 1		ents that benefited an	incider	
	co. List dir payrin	one had bonomod an	Dates of payment	Total amount Amount you still Reason for this payment paid owe Include creditor's name
	Insider's Name	AMANUM MICE OF THE TOTAL OF THE		\$
	Number Street		<del>, , , , , , , , , , , , , , , , , , , </del>	-
	M-70-4			
	City	State ZIF	<sup>2</sup> Code	
	Insider's Name	4.5		\$0.00 \$0.00
	tuoinei o iagilis			
	Number Street	1604-0-16-16-16-16-16-16-16-16-16-16-16-16-16-		
				-
		Store 71	Code	

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Debtor 1

ebtor 1	Sheila	R Alddle Name La	Jackson st Name	Case number (# known)	
	) Hazirania in	mode Rame La	Streening		
Part 4	Identify Lega	ıl Actions, Repos	ssessions, and Foreclos	ures	
9. With	in 1 year before ye	ou filed for bankru	ptcy, were you a party in an	y lawsuit, court action, or administrativ	
	all such matters, inc contract disputes.	cluding personal inju	ry cases, small claims action	s, divorces, collection suits, paternity action	ns, support or custody modifications
<b>I</b> N					
☐ Y	es. Fill in the detail	ls.			
			Nature of the case	Court or agency	Status of the case
	Case title			Court Name	Pending
			_	ous. Hand	On appeal
•			-	Number Street	Concluded
•	Case number	TIV TO THE TOTAL	_	City State ZIP C	ode
, reach	or-neffectionistiff of faction and recover extension engine.	ed in a management of the second section of the second section of the second section of the second section of		anning managara and the second	omajo elle como consigni fermilio estresista della costa collegia della collegia costa, setti pillo cilati
•	Case title			Court Name	Pending
					On appeal
•				Number Street	Concluded
(	Case number	.,	-	City State ZIP C	ode
<b>4</b>	es. Fill in the inform	nation below.	Describe the pro	nerty Date	e Value of the property
			go un millione de servicio de la constitución de millione de la companya de la co		¢ 0.00
	Creditor's Name			Samuel automotive Control of Cont	\$
	Number Street		Explain what hap	nened	
			ele en diplomation de la tre-diversaria de la fili	as repossessed.	
				as foreclosed.	
	<u> </u>	Otata 7/D		as garnished. as attached, seized, or levied.	
	City	State ZIP (	Describe the pro		e Value of the property
				•	
			T I I I I I I I I I I I I I I I I I I I		\$
	Creditor's Name				
	Number Street	WWW.WHITESTER	Explain what hap	pened	
				is repossessed.	
				s foreclosed.	
	City	State ZiP (		s garnished.	
Santaria	and the state of t		☐ Property wa	s attached, seized, or levied.	

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Case number (if known)\_

Jackson

No Yes. Fill in the details.							
res. Fill in the details.		Describe the action the	creditor took		Date action	Amount	
Creditor's Name		-			was taken		
Number Street					A CONTRACTOR OF THE CONTRACTOR	\$	0.0
City	State ZIP Code	Last 4 digits of account	number: XXXX		m Anna de la companya		
J.,	Cialo El Codo	East 4 digits of account	number. XXXX—				
	•	cy, was any of your prop stodian, or another offici		sion of an assign	nee for the ben	efit of	
No		reducing of unotifier officer					
Yes							
5: List Certain Gift	e and Contribu						
	s and continu	tions					
					<u> </u>		
		tions tcy, did you give any gift	s with a total value	of more than \$6	600 per person	?	
No	filed for bankrup		s with a total value	of more than \$6	600 per person	?	
No Yes. Fill in the details fo	filed for bankrup	tcy, did you give any gift	s with a total value	of more than \$6	inner (a Nijespanni i i i	esta la companya	144844
No	filed for bankrup		s with a total value	of more than \$6	000 per person  Dates you gave the gifts	esta la companya	
No Yes. Fill in the details fo	filed for bankrup	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave	esta la companya	
No Yes. Fill in the details for Gifts with a total value of	filed for bankrup r each gift. f more than \$500	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave	esta la companya	
No Yes. Fill in the details for Gifts with a total value of per person	filed for bankrup r each gift. f more than \$500	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave	esta la companya	0.0
No Yes. Fill in the details for Gifts with a total value of per person	filed for bankrup r each gift. f more than \$500	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave	esta la companya	0.0
No Yes. Fill in the details for Gifts with a total value of per person	filed for bankrup r each gift. f more than \$500	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave	esta la companya	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street	filed for bankrup r each gift. f more than \$600	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave	esta la companya	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street  City	filed for bankrup r each gift.  f more than \$500  Gift  State ZIP Code	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave	esta la companya	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street	filed for bankrup r each gift.  f more than \$500  Gift  State ZIP Code	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave the gifts	\$ \$	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street  City  Person's relationship to you	filed for bankrup r each gift.  f more than \$500  Gift  State ZIP Code	tcy, did you give any gift	s with a total value	of more than \$6	Dates you gave the gifts	sssvalue	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street  City	filed for bankrup r each gift.  f more than \$500  Gift  State ZIP Code	Describe the gifts	s with a total value	of more than \$6	Dates you gave the gifts	sssvalue	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street  City  Person's relationship to you  Gifts with a total value of per person	filed for bankrup or each gift.  If more than \$500  Gift  State ZIP Code	Describe the gifts	s with a total value	of more than \$6	Dates you gave the gifts	sssvalue	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street  City  Person's relationship to you	filed for bankrup or each gift.  If more than \$500  Gift  State ZIP Code	Describe the gifts	s with a total value	of more than \$6	Dates you gave the gifts	sssvalue	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street  City  Person's relationship to you  Gifts with a total value of per person	filed for bankrup or each gift.  If more than \$500  Gift  State ZIP Code	Describe the gifts	s with a total value	of more than \$6	Dates you gave the gifts	sssvalue	0.0
No Yes. Fill in the details for Gifts with a total value of per person  Person to Whom You Gave the  Number Street  City  Person's relationship to you  Gifts with a total value of per person	filed for bankrup or each gift.  If more than \$500  Gift  State ZIP Code	Describe the gifts	s with a total value	of more than \$6	Dates you gave the gifts	sssvalue	0.0

Sheila

Debtor 1

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otor 1	Sheila	R	Jackson	Case number (if known)			
	First Name	Middle Name	Last Name				
Wit	hin 2 years befor	e you filed for ba	nkruptcy, did you give any gifts o	r contributions with a total value of	more than \$6	i00 to any	y charity?
Ø							
Ц	Yes. Fill in the de	tails for each gift o	r contribution.		eranya wa engan wa e		
	Gifts or contribut		Describe what you contribute		ate you	Value	
	that total more th	an \$600			ontributed	PAN A S	
				a unity a s a sea sea sea		_	0.00
	Charity's Name					\$	V.0.
				3		\$	0.00
						·	
	Number Street		-				
				TERRETARIA			
	City State	ZIP Code					
	City State	ZIF COGO					
rt 6	List Certa	in Losses					
	Describe the prop how the loss occ	perty you lost and urred	Describe any insurance cover include the amount that insura claims on line 33 of Schedule A	nce has paid. List pending insurance	ate of your ss	Value o lost	of property
	A COMMANDA (MARIE COMMANDA A COMM				***************************************	\$	0.0
	1,000 g,000 g,000 og 1 og 10 om men men men men men men stekskilde at 1,0000		The latest the second s				
			THE MANUAL FOR PARTIES AND ASSESSED ASSESSED AS A STATE OF A STATE	militarist night (nist i i militarm i i i i righmymymym, i i i i ndiftan i militarist militarist, militarist,	gang ang ang ang ang ang ang ang ang ang		
rt 7		n Payments or					
Witi	hin 1 year before	you filed for ban t seeking bankru	kruptcy, did you or anyone else a ptcy or preparing a bankruptcy pe	ecting on your behalf pay or transfelection?	r any property	, to anyon	lie
Incl	ude any attorneys	, bankruptcy petiti	on preparers, or credit counseling a	gencies for services required in your b	ankruptcy.		
	No						
Ø	Yes. Fill in the de	tails.	ur un tradesta, a propria esta de l'arche forgativa destre de	and a second of the second of	disease (Code (SANS))	gi yaya basa A	garage and a second
	Midwoot Con	sultants Group	Description and value of any	property transferred Da	ate payment or ansfer was	Amoun	t of paymen
	Person Who Was Pa			mi	ade	g va Villiab	evina a evalue
	9212 S. Ston	y Island Ave	Preparation of Banrup		3/04/2016	<b>.</b>	100.00
	Number Street				70-72010	<b>\$</b>	100.00
						\$	0.00
	Chicago	IL 606				*	· · · · · · · · · · · · · · · · · · ·
	City	State ZiP Co	de	TO THE PERSON OF			
	Email or website add	ess		of inchange (Common			
		-		The same			
	Person Who Made th	e Payment, if Not You					

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or 1 Sheila R	Jackson Name	Case number (# known)		
				N 1945
	Description and value of any property t	ransferred Date payment or transfer was made	Amount of payment	
001 Debtorcc.com Person Who Was Paid	Credit Counseling			
372 Summit Ave		03/04/2016	\$	14.
Number Street			\$	0.
	The state of the s			
Jersey City NJ 07306	-			
City State ZIP Code				
www.debtorcc.com	_			
Email or website address				
Person Who Made the Payment, if Not You				
Yes. Fill in the details.	Description and value of any property t	ransferred Date payment or transfer was	Amount of p	aym
Person Who Was Paid	•	made		
Person vyno vyas Paiu			\$	0.
Number Street	•		Ų <u></u>	
			\$	0.
City State ZIP Code	-			
transferred in the ordinary course of your include both outright transfers and transfers to not include gifts and transfers that you har No  Yes. Fill in the details.	made as security (such as the granting of ave already listed on this statement.  Description and value of property	Describe any property or payments received	Date tra	
December 1	transferred	or debts paid in exchange	was ma	ue .
HARRON IMPA WACGIVARI I FARSTOI				
Person Who Received Transfer			***************************************	
Person Who Received Transfer  Number Street				
Number Street				
Number Street  City State ZIP Code			The state of the s	
Number Street				
Number Street  City State ZIP Code  Person's relationship to you				
Number Street  City State ZiP Code  Person's relationship to you				
Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer				

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ebtor 1	Sheila	R	Jackson	Case number (if known)	
	First Name	Middle Name	Last Name		
				property to a self-settled trust or similar dev	rice of which you
	-	( i nese are oπen calle	ed asset-protection devices.)		
<b>2</b>					
<b>LJ</b> 1	es. Fill in the de	etails.			
			Description and value of the	ne property transferred	Date transfer
			parties and approximate the second		was made
					1
ħ	Name of trust				
			Securitive consistence that a distribute a trade of the account of	dakan mendengan kebangan dan sebagai dan dalam berapa perungan perungan dan perungan perungan perungan sebagai	alloci machanidantan Pan Bach Crand - p
	I		0.0004-000-000-000.000.000-000-000-000-0		
Part 8:	List Certain	n Financial Accou	ints, instruments, Safe De	eposit Boxes, and Storage Units	
	-	<del>.</del>	uptcy, were any financial acc	ounts or instruments held in your name, or f	or your benefit,
		d, or transferred?			
	_			ts; certificates of deposit; shares in banks, c	redit unions,
	<del></del>	pension runas, coo	peratives, associations, and o	ther financial institutions.	
	io 'es. Fill in the d	lataila			
T 1	es. Fill in the c	ietalis,			
			Last 4 digits of account nu	Imber Type of account or Date account Instrument closed, sold, r	o settu perilitaria de la circa de la caracteria de la companio de la companio de la companio de la companio d
				or transferred	
	Name of Financial I	nstitution	XXXX	Checking	<b>s</b> 0.00
	Number Street			☐ Savings	
				Money market	
			<del></del>	☐ Brokerage	
	City	State ZIP Code		Other	
				Coner	THE RESERVE OF THE PARTY OF THE
			1000	<b>D</b>	s 0.00
	Name of Financial I	nstitution	XXXX	Checking	\$
				☐ Savings	
,	Number Street			☐ Money market	
			19 <u>-1-1-19</u>	☐ Brokerage	
				Other	
	City	State ZIP Code			
. Do w	ou now have o	r did vou have withi	n 1 year before you filed for b	ankruptcy, any safe deposit box or other de	pository for
		other valuables?	., , , , , , , , , , , , , , , , , , ,		,
M M	0				
☐ Y	es. Fill in the d	etails.			
			Who else had access to k?	P Describe the contents	Do you still
					have it?
				470	☐ No
i	Name of Financial I	nstitution	Name		☐ Yes
			ITMITT	The state of the s	
i	Number Street		Number Street		
			ररसरराज्य सर्वेषका		# :
•			City State ZIP Co	de	5
	A	7000	City State ZIP CO		

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Debtor 1	Sheila	R	Jackson	Case number (if known)	
	First Name	Middle Name	Last Name		
		perty in a storage u	nit or place other than your hon	ne within 1 year before you filed for bankruptcy?	•
□ Y	es. Fill in the d	etails.			
			Who else has or had access	to it? Describe the contents	Do you still have it?
				Various de la constitución de la	
				Samilian sharkan dan Hamilian (sha Mari Mari 18 Mari 18 Mari 18 Mari 18 Mari	□ No
	Name of Storage F	acility	Name		☐ Yes
	Number Street		Number Street	Tention than the relative than the relative tention than the relative	
	Manual Olidat		Hamai Gradi		
	<del></del>		City State ZIP Code		
	City	State ZIP Code			j
era gross manariantina vi		State ZIP Code	a termina non a um actividad com mila ex-minam prilimentamentan i recordad ha que acolorism premiente com activo	a the state of the	And the second section of the second sec
Part 9	Idontific	Dranarty Voy Hol	d or Control for Someone E	Flee	
		• •			
			it someone else owns? Include	any property you borrowed from, are storing for	r,
orn 121	old in trust for	someone.			
	NO Yes. Fill in the c	fataile			
_	res. i iii iii die c	icians.	Where is the property?	Describe the property	Value
			Miere to the property		and confidence and the first angle
					\$ 0.00
	Owner's Name				\$0.00
	Number Street		Number Street		
	Number Street		Editoria de la companya de la compa		
	**************************************				
	City	State ZIP Code	City State	ZIP Code	
044	Ohan Bar	4-11- Ab Ei	nmental information		
Part 1	Give De	talls About Envilo	inmental information		
For the	purpose of Par	t 10, the following d	efinitions apply:		
<b>≅</b> Envi	ironmental law	means any federal, s	state, or local statute or regulat	ion concerning pollution, contamination, release	s of
			, or material into the air, land, s Illing the cleanup of these subs	oil, surface water, groundwater, or other mediun	n,
	•	_	<del>-</del>		
			perty as defined under any envi ize it, including disposal sites.	ironmental law, whether you now own, operate, o	or
		• •	. • ,		
			environmental law defines as a nt, contaminant, or similar term	n hazardous waste, hazardous substance, toxic	
		· -			
Report	all notices, rele	ases, and proceeding	gs that you know about, regard	iless of when they occurred.	
24 Has	anv governmen	tal unit notified you	that you may be liable or poten	tially liable under or in violation of an environme	ental law?
	, <b>3</b>	, , , , , , , , , , , , , , , , , , , ,		•	
<b>Ø</b> 1	٧o				
<b>1</b>	Yes. Fill in the d	letails.			
			Governmental unit	Environmental law, if you know it	Date of notice
				The supplication of the state o	
Ī	Name of site		Governmental unit		
-					
Ī	Number Street		Number Street		
			City State ZIP Co	de	
_					
7	City	State ZIP Code	_		

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tor 1	Sheila First Name	R Middle Name	Jackson Last Name	Case number (if known)	
	FRST Name	Miggie Name	Last Name		
Have	you notified an	y governmental un	it of any release of hazardous r	naterial?	
<b>Ø</b> 1					
U '	es. Fill in the de	etails.	Governmental unit	Environmental law, if you know it	Date of notice
	Name of site		Governmental unit		
	Number Street		Number Street		
			City State ZIP C	ode	
	City	State ZIP Code			
ave	you been a par	ty in any judicial or	administrative proceeding und	der any environmental law? Include settlements	and orders.
<b>Z</b> !		4.44			
, r	es. Fill in the de	etalis.	Court or agency	Nature of the case	Status of the
	S 461-				case
•	Case title		Court Name		Pending
-			Number Chross		☐ On appeal
			Number Street		Concluded
Č	Case number		City State	ZIP Code	
t 1			Business or Connections to		
1 <b>1</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A member of A partner in a An officer, di An owner of a	a limited liability co a partnership rector, or managing at least 5% of the vo above applies. Go t	ompany (LLC) or limited liability gexecutive of a corporation oting or equity securities of a c	orporation  h business.	State and the state of the stat
	Business Name		— <u>(6.88.886.889.087.4.986.00084.999</u>		·
	Number Street			EIN:	
			Name of accountant or book	kkeeper Dates business existed	and the second of the second o
				From To _	·
	City	State ZIP Code	Describe the nature of the b	usiness Employer Identification no	umber
	Business Name			Do not include Social Sec	urity number or ITIN.
				EIN:	
	Number Street		Name of accountant or bool	kkeeper Dates business existed	
				From To	
	City	State ZIP Code	handed production of the state	From 10	

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Debtor 1	Sheila First Name	R Middle Name	Jackson Lest Ne		ase number	(if known)
	करात. का राक्ष्यम है एक्ट्रिक है कार्या नेपासमान स्था राज प्रदेश की सार सारत सके स्था	د الميانية الميانية الميانية الميانية ال	l gar, ig i i generalisma jedy madžiroonini rosedii i na suguuritik	Describe the nature of the business		Employer identification number  Do not include Social Security number or ITIN.
	Business Name					EIN:
	Number Street			Name of accountant or bookkeeper		Dates business existed
	City	State	ZIP Code			From To
	hin 2 years befo itutions, credito			y, did you give a financial statement to	anyone ab	out your business? Include all financial
	No Yes. Fill in the d	letails below.				
_				Date issued		
	Name			MM/DD/YYYY		
	Number Street	***************************************				
		<u></u>				
	City	State	ZIP Code			
Part 1						
an: in (	swers are true a	ind correct. I a bankruptc	understand y case can r	of Financial Affairs and any attachments that making a false statement, conceali esult in fines up to \$250,000, or impriso	ng propert	y, or obtaining money or property by fraud
10	0.3.0. gg 132, 1	/ / / / / / / / / / / / / / / / / / /	u 337 1.	4.0		
×	Signature of Debt	$a \int a d$	RAIN	Signature of Debtor 2		
	100	1		• • • • • • • • • • • • • • • • • • • •		
n.	Date <u>04/23</u>	ZOLL ditional nages	to Vour Sta	Date tement of Financial Affairs for Individua	als Filina fa	or Bankruptcy (Official Form 107)?
<u> </u>	No Yes	illonar pages	10 1001 010	Content of a manual visiting of the manual vi		
	-	ee to pay son	neone who i	s not an attorney to help you fill out bar	akruptcy fo	orms?
	No Yes. Name of po	erson	Verd	nica Eason	Attach	n the <i>Bankruptcy Petition Preparer's Notice,</i> aration, and Signature (Official Form 119).

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Fill in this inf	ormation to	identify yo	ur case:		
Debtor 1	Sheila First Name	R.	Jackson Middle Name		
Date o	i necesanç		Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Name	***************************************
					1020
United States B	sankruptcy Co	urt for the: INC	orthern District of Illinoi	S	
Case number					
(If known)					

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

information below.	en en 1000 men grang fallig andre en mente en en en en en en en en entre en	
Identify the creditor and the property that	is collateral What do you intend to do with the property the secures a debt?	
Creditor's name: n/a	☐ Surrender the property.	<b>☑</b> No
The same the same and the same	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	anananaa
Creditor's	☐ Surrender the property.	₩ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
<b>3</b>	Retain the property and [explain]:	and the same of th
Creditor's	☐ Surrender the property.	<b>☑</b> No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
J	☐ Retain the property and [explain]:	_
Creditor's	☐ Surrender the property.	 ☑ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
<u> </u>	Retain the property and [explain]:	

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Debtor 1

Sheila First Name

Case number (If known)

Part 2: List Your Unexpired Personal Property L	.ease:
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For any unexpired personal property lease that you listed in <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G), fill in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).					
Describe your unexpired personal property leases	Will the lease be assumed?				
Lessor's name: Carol Carroll	□ No				
Description of leased Residential Monthly Lease property:	<b>≝</b> Yes				
Lessor's name:	<b>☑</b> No				
Description of leased property:	☐ Yes				
Lessor's name:	<b>☑</b> No				
Description of leased property:	□ Yes				
Lessor's name:	<b>₩</b> No				
Description of leased property:	Yes				
Lessor's name:	<b>☑</b> No				
Description of leased property:	Yes				
Lessor's name:	<b>☑</b> No				
Description of leased property:	Yes				
Lessor's name:	<b>₩</b> No				
Description of leased property:	☐ Yes				
art 3: Sign Below					
Under penalty of perjury, I declare that I have indicated my intention about any personal/property that is subject to an unexpired lease.	property of my estate that secures a debt and any				
heila (Joseson *					
Signature of Debtor 1 Signature of Debtor 2					

Date MM / DD / YYYY

Case 16-14044 Doc 1 Filed 04/25/16 Entered 04/25/16 15:47:52 Desc Main Page 55 of 55 Document Fill in this information to identify your case: Jackson Sheila Debtor 1 Middle Name Lasi Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

X

Official Form 106Dec

Case number (If known)

United States Bankruptcy Court for the: Northern District of Illinois

### **Declaration About an Individual Debtor's Schedules**

12/15

☐ Check if this is an amended filing

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No
Yes. Name of person
Veronica Eason
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

Date MM / DD / YYYY